

DATE 04/14/2004

Columbia County Building Permit

PERMIT
000021743

This Permit Expires One Year From the Date of Issue

APPLICANT RAY LUSSIER/ADVANTAGE POOLS PHONE 758.7522
ADDRESS 757 SW SR 247 LAKE CITY FL 32055
OWNER KYLE MCCARTY PHONE 758.7522
ADDRESS 3546 NW NOEGLE ROAD WELLBORN FL 32094
CONTRACTOR RAY LUSSIER/ADVANTAGE POOLS PHONE 758.7522
LOCATION OF PROPERTY BROWN ROAD CROSS TRACKS TO C135, 1/2 MILE ON LEFT

TYPE DEVELOPMENT SWIMMING POOL ESTIMATED COST OF CONSTRUCTION 29500.00
HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING A-3 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. FLOOD ZONE N/A DEVELOPMENT PERMIT NO.

PARCEL ID 13-3S-15-00169-001 SUBDIVISION
LOT BLOCK PHASE UNIT TOTAL ACRES

Culvert Permit No. Culvert Waiver CPC1456754 Contractor's License Number
Agent
Applicant/Owner/Contractor
EXISTING N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident
COMMENTS: NOC ON FILE

Check # or Cash 2248

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by
Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by
Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by
Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by
Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by
M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 150.00 CERTIFICATION FEE \$.00 SURCHARGE FEE \$.00
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ TOTAL FEE 200.00
INSPECTORS OFFICE CLERKS OFFICE

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

**Columbia County
Building Permit Application**

Date _____

Application No. 0403-82

Applicants Name & Address Raymond Lussier Phone 758-7523
757 SW SR 247 LAKE CITY FL 32055

Owners Name & Address Kyle MCCARTY Phone 758-1683
3546 NW Noegel Rd Wellborn FL 32094

Fee Simple Owners Name & Address _____ Phone _____

Contractors Name & Address Advantage Pools Phone 758-7523
757 SW SR 247 LAKE CITY FL 32055

Legal Description of Property _____

Location of Property CR 135 Noegel Rd, Wellborn FL

Tax Parcel Identification No. 13-35-15-00169-001 Estimated Cost of Construction \$ 29,500.

Type of Development Pool Number of Existing Dwellings on Property _____

Comprehensive Plan Map Category A-3 Zoning Map Category A-3

Building Height _____ Number of Stories _____ Floor Area _____ Total Acreage in Development _____

Distance From Property Lines (Set Backs) Front side 30 Side 160 Rear 30 Street 250

Flood Zone N/A Certification Date _____ Development Permit N/A

Bonding Company Name & Address _____

Architect/Engineer Name & Address Michael Robinson 921 Shadow Dr Lakeland FL

Mortgage Lenders Name & Address _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

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Ray Lussier
Owner or Agent (including contractor)

Ray Lussier
Contractor
CPC 1456734
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 20th day of March by Cowan

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 20th day of March by Cowan

Personally Known X OR Produced Identification

Personally Known X OR Produced Identification



Carman James
MY COMMISSION # DD223375 EXPIRES
June 16, 2007
BONDED THRU TROY FAIR INSURANCE, INC.

#21743

Return to: (enclose self-addressed stamped envelope)

Name: Advantage Pools

Address: Rt. 18 Box 18800, Lake City, FL 32025

This instrument Prepared by:

Name: Advantage Pools

Address: Rt. 18 Box 18800, Lake City, FL 32025

Property Appraiser's Parcel Identification

Inst:2004006757 Date:03/26/2004 Time:10:14

MCK DC,P.Dewitt Cason,Columbia County B:1010 P:2122

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

NOTICE OF COMMENCEMENT

Permit No. _____

Tax Folio No. _____

State of Florida _____

County of Columbia }

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with chapter 713 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Legal description of property (include Street Address, if available) 13-35-15-00169-00
3546 NW Noegel Rd. Wellborn FL 32094

General description of improvements Swimming PoolsOwner's Name Tammy & Kyle McCartyAddress 3546 NW Noegel Rd. Wellborn FL 32094

Owner's interest in site of the improvement _____

Fee Simple Title holder (if other than owner) _____

Address _____ Phone: _____ Fax: _____

Contractor Advantage PoolsAddress Rt. 18 Box 18800, Lake City, FL 32025 Phone: 386-758-7522 Fax: 386-758-6932

Surety _____ Phone: _____ Fax: _____

Address _____ Amount of bond \$ _____

Lender's Name _____

Address: _____ Phone: _____ Fax: _____

Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7, Florida Statutes.

Name _____

Address _____ Phone: _____ Fax: _____

In addition, to himself, owner designates KAY LUSSIEROf ADVANTAGE POOLS Phone: 254-7522 Fax: 758-6932

to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified)

X KYLE E. McCARTYX Kyle E. McCarty
Signature Printed Name of Owner

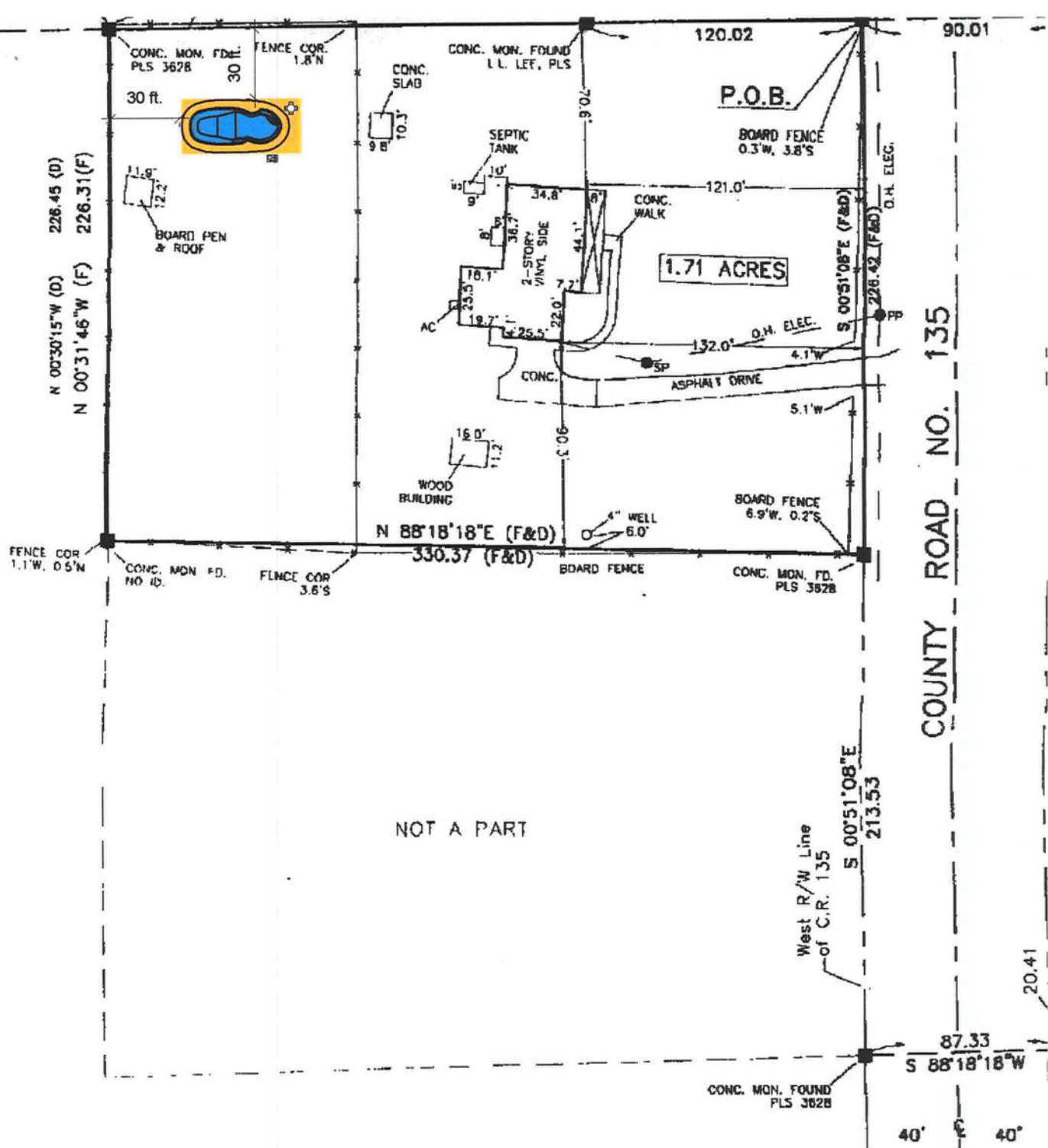
NOTARY RUBBER STAMP SEAL

I have relied upon the following identification of the Affiant picture id

Carman James
MY COMMISSION # DD223375 EXPIRES
June 16, 2007
BONDED THRU TROY FAIN INSURANCE, INC.

Sworn to and subscribed before me this 9th day of 3 2004
Carman James
Notary Signature
Carman James
Printed Name

Notice of Commencement.max



LEGEND	
CMF=CONCRETE MONUMENT FOUND	OH ELEC=OVERHEAD ELECTRIC LINE
CMS=CONCRETE MONUMENT SET	OH TEL=OVERHEAD TELEPHONE LINE
IPF=IRON PIPE FOUND	SEC.=SECTION
IPS=IRON PIPE SET	RCE.=RANGE
PLS=PROFESSIONAL LAND SURVEYOR	TWP.=TOWNSHIP
P.S.M.=PROFESSIONAL SURVEYOR & MAPPER	COR.=CORNER
R/W=RIGHT-OF-WAY	NE=NORTHEAST
CL=CENTER LINE	NW=NORTHWEST
PL=PROPERTY LINE	SW=SOUTHWEST
PP=POWER POLE	SE=SOUTHEAST
SP=SERVICE POLE	LB=LICENSED BUSINESS
TPED=TELEPHONE PEDESTAL	P.O.B.=POINT OF BEGINNING
IRC=IRON REBAR & CAP	(F)=FIELD MEASUREMENTS